ONC Health IT Certification Program 2015 Edition Test Methods Home

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The Office of the National Coordinator for Health Information Technology (ONC) develops the functional and conformance testing requirements for the testing and certification of Health IT Modules to the certification criteria adopted by the Health and Human Services (HHS) Secretary. Only ONC-approved test methods can be used to test products intended for certification in the ONC Health IT Certification Program (please note that any individual or organization may submit test methods to ONC for approval). Test methods (test procedures, test data, and test tools) are used by Accredited Testing Laboratories (ATLs) and ONC-Approved Certification Bodies (ONC-ACBs) to evaluate the conformance and functionality of Health IT Modules.

Please consult the Final Rule entitled: 2015 Edition Health Information Technology (Health IT) Certification Criteria, 2015 Edition Base Electronic Health Record (EHR) Definition, and ONC Health IT Certification Program Modifications as well as the Certification Companion Guide for a detailed description of the certification criterion with which these testing steps are associated. We also encourage developers to consult the Certification Companion Guide in tandem with the test procedure as they provide clarifications that may be useful for product development and testing.

The public comment period for the 2015 Edition Draft § 170.315 (c)(1), § 170.315 (c)(2), § 170.315 (c)(3) and § 170.315 (c)(4) ended on July 8th, 2016. The public comment period for the 2015 Edition Draft § 170.315 (g)(1) and § 170.315 (g)(2) and § 170.315 (b)(3), 170.315 (h)(1) and 170.315 (h)(2) Test Procedures found below ended December 31st 2015. The comment period for the remaining Test Procedures ended on November 30th 2015.

Finally, we encourage commenters to review the **Summary of Comment for 2015 Edition NPRM Draft Test Procedures** for more information on how the 2015 draft test procedures were updated in response to the first round of public comment.

All test procedures will undergo public review and comment before being finalized and approved by the National Coordinator. **The public comment period for 2015 Edition Draft test procedures, and test data for both §170.315(g)(1) and (g)(2) criteria will end on November 21st, 2016**.

In an effort to respond to previous comments from the industry on the (g)(1) and (g)(2) test procedures and test data, ONC has modified the format of the test data. First, the test data has been split into two sets of test data, one for (g)(1) and one for (g)(2). As such, the test data and test procedure for (g)(2) has one additional scenario that tests whether or not the denominator increments correctly.

Second, all of the Advancing Care Information measures have been added to the test data and the test procedures for each measure. The Advancing Care Information measures align with either the modified Stage 2 measures or the Stage 3 measures.

Third, in order to ease the burden on health IT developers, while still providing rigorous testing, we have moved to a single set of test patients that are used across each required test. This will allow health IT developers to enter a smaller number of test patients into their Health IT Modules and use them across each applicable test.

The final TPs will need to be updated to reflect final Quality Payment Program (QPP) and Hospital Outpatient Prospective Payment System (OPPS) measure language, however the comment period will not be extended nor will the updated measure language affect the test approach.

Further, we have implemented a single global required test that uses a smaller but separate set of test patients. For the global test, Health IT Developers may choose any measure from the required tests to demonstrate the global requirements. Please review the §170.315(g)(1) and (g)(2) test procedures and test data and provide feedback by November 21, 2016. We look forward to receiving your feedback.

Each test procedure includes a grid of testing components that the ATLs would use as the test approach for a particular criteria. The key is below:

Gap	Indicates that a Health IT module is eligible to receive gap certification if previously certified to the 2014 Edition criterion.
	Documentation is an approved method to demonstrate conformance. This may include documents from the health IT developer or third-party that demonstrate/attest to the compliance with the criterion.
	Visual inspection is an approved method to demonstrate conformance. Most commonly, this will be accomplished via a live demonstration of functionality that meets the criterion.
	Indicates that a test tool(s) exists and must be used to test a portion or all of a Health IT Module's conformance to the criterion.
ONC Supplied Test Data	Indicates that test data supplied by ONC or as required by the tool(s) must be used during the test.

Criteria

Criterion #	Certification Criterion Name	Test Procedure Link
§ 170.315 (g)(1)	**Automated Numerator Recording**	§ 170.315 (g)(1) Automated Numerator Recording
§ 170.315 (g)(2)	**Automated Measure Calculation**	§ 170.315 (g)(2) Automated Measure Calculation
§ 170.315 (g)(1)(2)	**Automated Measure Calculation and Numerator Recording Test Data**	§ 170.315 (g)(1)(2) Test Data
§ 170.315 (c)(1)	Clinical Quality Measures – Record and Export	§ 170.315 (c)(1) Clinical Quality Measures – Record and Export
§ 170.315 (c)(2)	Clinical Quality Measures – Import and Calculate	§ 170.315 (c)(2) Clinical Quality Measures – Import and Calculate
§ 170.315 (c)(3)	Clinical Quality Measures – Report	§ 170.315 (c)(3) Clinical Quality Measures – Report
§ 170.315 (c)(4)	Clinical Quality Measures - Filter	§ 170.315 (c)(4) Clinical Quality Measures - Filter

§ 170.315 (b)(3)	Electronic Prescribing	§ 170.315 (b)(3) Electronic Prescribing
§ 170.315 (h)(1)	Direct Project	§ 170.315 (h)(1) Direct Project
§ 170.315 (h)(2)	Direct Project, Edge Protocol, and XDR/XDM	§ 170.315 (h)(2) Direct Project, Edge Protocol, and XDR/XDM
§ 170.315 (a)(1)	Computerized Provider Order Entry (CPOE) – Medications	§ 170.315 (a)(1) Computerized Provider Order Entry (CPOE) – Medications
§ 170.315 (a)(2)	CPOE – Laboratory	§ 170.315 (a)(2) CPOE – Laboratory
§ 170.315 (a)(3)	CPOE – Diagnostic Imaging	§ 170.315 (a)(3) CPOE – Diagnostic Imaging
§ 170.315 (a)(4)	Drug-Drug, Drug-Allergy Interaction Checks for CPOE	§ 170.315 (a)(4) Drug-Drug, Drug-Allergy Interaction Checks for CPOE
§ 170.315 (a)(5)	Demographics	§ 170.315 (a)(5) Demographics
§ 170.315 (a)(6)	Problem List	§ 170.315 (a)(6) Problem List
§ 170.315 (a)(7)	Medication List	§ 170.315 (a)(7) Medication List
§ 170.315 (a)(8)	Medication Allergy List	§ 170.315 (a)(8) Medication Allergy List
§ 170.315 (a)(9)	Clinical Decision Support	§ 170.315 (a)(9) Clinical Decision Support
§ 170.315 (a)(10)	Drug-Formulary and Preferred Drug List Checks	§ 170.315 (a)(10) Drug-Formulary and Preferred Drug List Checks
§ 170.315 (a)(11)	Smoking Status	§ 170.315 (a)(11) Smoking Status

§ 170.315 (a)(12)	Family Health History	§ 170.315 (a)(12) Family Health History
§ 170.315 (a)(13)	Patient-Specific Education Resources	§ 170.315 (a)(13) Patient-Specific Education Resources
§ 170.315 (a)(14)	Implantable Device List	§ 170.315 (a)(14) Implantable Device List
§ 170.315 (a)(15)	Social, Psychological, and Behavioral Determinants Data	§ 170.315 (a)(15) Social, Psychological, and Behavioral Determinants Data
§ 170.315 (b)(1)	Transitions of Care	§ 170.315 (b)(1) Transitions of Care
§ 170.315 (b)(2)	Clinical Information Reconciliation and Incorporation	§ 170.315 (b)(2) Clinical Information Reconciliation and Incorporation
§ 170.315 (b)(4)	Common Clinical Data Set Summary Record - Create	§ 170.315 (b)(4) Common Clinical Data Set Summary Record - Create
§ 170.315 (b)(5)	Common Clinical Data Set Summary Record - Receive	§ 170.315 (b)(5) Common Clinical Data Set Summary Record - Receive
§ 170.315 (b)(6)	Data Export	§ 170.315 (b)(6) Data Export
§ 170.315 (b)(7)	Data Segmentation for Privacy - Send	§ 170.315 (b)(7) Data Segmentation for Privacy - Send
§ 170.315 (b)(8)	Data Segmentation for Privacy - Receive	§ 170.315 (b)(8) Data Segmentation for Privacy - Receive
§ 170.315 (b)(9)	Care Plan	§ 170.315 (b)(9) Care Plan
§ 170.315 (d)(1)	Authentication, Access Control, Authorization	§ 170.315 (d)(1) Authentication, Access Control, Authorization
§ 170.315 (d)(2)	Auditable Events and Tamper-Resistance	§ 170.315 (d)(2) Auditable Events and Tamper-Resistance

§ 170.315 (d)(3)	Audit Report(s)	§ 170.315 (d)(3) Audit Report(s)
§ 170.315 (d)(4)	Amendments	§ 170.315 (d)(4) Amendments
§ 170.315 (d)(5)	Automatic Access Time-out	§ 170.315 (d)(5) Automatic Access Time-out
§ 170.315 (d)(6)	Emergency Access	§ 170.315 (d)(6) Emergency Access
§ 170.315 (d)(7)	End-User Device Encryption	§ 170.315 (d)(7) End-User Device Encryption
§ 170.315 (d)(8)	Integrity	§ 170.315 (d)(8) Integrity
§ 170.315 (d)(9)	Trusted Connection	§ 170.315 (d)(9) Trusted Connection
§ 170.315 (d)(10)	Auditing Actions on Health Information	§ 170.315 (d)(10) Auditing Actions on Health Information
§ 170.315 (d)(11)	Accounting of Disclosures	§ 170.315 (d)(11) Accounting of Disclosures
§ 170.315 (e)(1)	View, Download, and Transmit to 3rd Party	§ 170.315 (e)(1) View, Download, and Transmit to 3rd Party
§ 170.315 (e)(2)	Secure Messaging	§ 170.315 (e)(2) Secure Messaging
§ 170.315 (e)(3)	Patient Health Information Capture	§ 170.315 (e)(3) Patient Health Information Capture
§ 170.315 (f)(1)	Transmission to Immunization Registries	§ 170.315 (f)(1) Transmission to Immunization Registries
§ 170.315 (f)(2)	Transmission to Public Health Agencies - Syndromic Surveillance	§ 170.315 (f)(2) Transmission to Public Health Agencies - Syndromic Surveillance

§ 170.315 (f)(3)	Transmission to Public Health Agencies – Reportable Laboratory Tests and Values/Results	§ 170.315 (f)(3) Transmission to Public Health Agencies – Reportable Laboratory Tests and Values/Results
§ 170.315 (f)(4)	Transmission to Cancer Registries	§ 170.315 (f)(4) Transmission to Cancer Registries
§ 170.315 (f)(5)	Transmission to Public Health Agencies – Electronic Case Reporting	§ 170.315 (f)(5) Transmission to Public Health Agencies – Electronic Case Reporting
§ 170.315 (f)(6)	Transmission to Public Health Agencies – Antimicrobial Use and Resistance Reporting	§ 170.315 (f)(6) Transmission to Public Health Agencies – Antimicrobial Use and Resistance Reporting
§ 170.315 (f)(7)	Transmission to Public Health Agencies – Health Care Surveys	§ 170.315 (f)(7) Transmission to Public Health Agencies – Health Care Surveys
§ 170.315 (g)(3)	Safety-Enhanced Design	§ 170.315 (g)(3) Safety-Enhanced Design
§ 170.315 (g)(4)	Quality Management System	§ 170.315 (g)(4) Quality Management System
§ 170.315 (g)(5)	Accessibility-Centered Design	§ 170.315 (g)(5) Accessibility-Centered Design
§ 170.315 (g)(6)	Consolidated CDA Creation	§ 170.315 (g)(6) Consolidated CDA Creation
§ 170.315 (g)(7)	Application Access - Patient Selection	§ 170.315 (g)(7) Application Access - Patient Selection
§ 170.315 (g)(8)	Application Access - Data Category Request	§ 170.315 (g)(8) Application Access - Data Category Request
§ 170.315 (g)(9)	Application Access - All Data Request	§ 170.315 (g)(9) Application Access - All Data Request
	Cypress Implementation Guide	Cypress Quick Start Guide

NIST

Application	Tool Production URL	NIST Test Process Docume
Immunization	http://hl7v2-iz-r1.5-testing.nist.gov	NIST_IZ_Normative_Test_Pr
Syndromic surveillance	http://hl7v2-ss-r2-testing.nist.gov/	NIST_SS_Normative_Test_P
Electronic prescribing	http://erx-2015.nist.gov/	NIST_eRx_Normative_Test_
Reportable laboratory results	http://hl7v2-elr-testing.nist.gov/	NIST_ELR_Normative_Test_
C-CDA Cancer Registry Reporting Validation Tool	http://cda-validation.nist.gov/cda-validation/muCRV.html	None
NIST Health Care Survey validator	http://cda-validation.nist.gov/cda-validation/muNHCS.html	None
Edge Test Tool (ETT)	http://edge.nist.gov/	None
Transport Test Tool (TTT) (Original)	http://transport-testing.nist.gov/	None

The Normative Test Process Documents are available for review and comment. Please submit the comments to the address provided (NTPD_comments@nist.gov)

Key	Summary	Created	Organization	Name

No issues found